

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

U.S. Department of Justice
United States Marshals Service

PLAINTIFF

HARRIET MENEZES

DEFENDANT

MARIA TORRE

2004 AUG 31 P 1:36

COURT CASE NUMBER

04-10366 JLT

TYPE OF PROCESS

SC

SERVE

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

MARIA TORRE

U.S. DISTRICT COURT
DISTRICT OF MASSACHUSETTS

AT

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
1275 K Street NW, Washington DC 20005-4090

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

HARRIET MENEZES
169 THOREAU ST, 8
CONCORD MA 01742

Number of process to be served with this Form - 285

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

MARIA TORRE IS PART OF ASSOCIATION OF Flight Attendants
(202) 712-9799,

Signature of Attorney or other Originator requesting service on behalf of:

Harriet Menezes

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

(978) 369-4693

DATE

7-26-04

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINEI acknowledge receipt for the total number of process indicated.
(Sign only first USM 285 if more than one USM 285 is submitted)

Total Process

1

District of Origin

No. 38

District to Serve

No. 16

Signature of Authorized USMS Deputy or Clerk

Nancy Salcedo

Date

7/26/04

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Ed Gilman, Associate General Counsel

Address (complete only if different than shown above)

Moved to 501 2nd Street 9th Flr.

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service

8/9/04

Time

2:25 pm

Signature of U.S. Marshal or Deputy

M. Salcedo

Service Fee

\$45

Total Mileage Charges
(including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal or

Amount of Refund

REMARKS:

7/28/04 Paid D/WA

PRIOR EDITIONS
MAY BE USED

1. CLERK OF THE COURT

FORM USM-285 (Rev. 12/15/80)